



REPORTING PROCEDURE FOR EXPOSURE TO AIR/BLOODBORNE PATHOGENS

November 1, 2006

Purpose: To establish safety standards and reporting protocol as related to air/bloodborne pathogen exposure. Air/bloodborne pathogens exposures are considered on-the-job injuries/illnesses when an occupational illness has been diagnosed. Some incidents such as lacerations or diagnosed TB may involve both air/bloodborne pathogens exposure and an on-the-job injury/illness (Policy No. GME-03 addresses procedures for responding to on-the-job injuries). For exposure to air/bloodborne pathogens, adherence to the following protocol is required.

POLICY:

1. Because residents are located at different hospitals during their training program, a particular hospital's occupational exposure plan (e.g., Air/Bloodborne Pathogen Exposure) will govern. Residents are required to comply with universal precaution protocols and if/when an incident/exposure occurs to take immediate action to limit the potential residuals associated with the incident.
2. All hospitals require completion of an incident report within a few hours of the incident. Initial bloodborne pathogens testing, medical counseling and continued medical monitoring for air/bloodborne pathogens exposure will be provided by the hospital at no cost to either the resident or UMKC.

Responsibility:

1. **Resident:**
 - a. Practice universal precautions and wear personal protective equipment when appropriate.
 - b. Report exposure immediately following the incident as defined by hospital protocol.
 - c. Notify the Residency Coordinator of the exposure and then of any resulting medical intervention.
 - d. It is the resident's responsibility to request medical attention. **If the resident wishes to seek medical attention under Workers' Compensation, s/he must contact the Risk Management Office at 235-1623 prior to being seen by a doctor. Any medical treatment not authorized by UMKC Risk Management will be at the resident's expense.**

Life Threatening Exception

In case of life threatening injuries the resident should seek immediate medical attention at the emergency room of the hospital in which s/he is working. The UMKC Risk Management Office must be notified as soon as possible of the injury.

- e. Contact the UMKC GME Office at 816-235-6627 the same day of the accident or the next day if between the hours of 5 p.m. and 8 a.m. providing the following information:
 - Description of incident, including date and time of exposure.
 - Involved body part.
 - When you reported to work that day.
 - Any witnesses to the incident with day-time phone numbers.
- f. A choice of three options for medical care exist:
 - Seek medical attention immediately by contacting the UMKC Risk Management Office at 235-1623 (**highly recommended as the option of choice**).
 - Seek medical attention on your own at your own expense.
 - Seek medical attention at a later date which may complicate the worker's compensation claim.
- g. The UMKC GME Office will complete the University Risk Management report of the injury form to be signed by the Director, Graduate Medical Education Operations, and then forward to the UMKC Risk Management office.

2. Training Hospital:

- a. Notify the resident of testing results.
- b. Send a copy of the hospital's examination/testing report to the UMKC Risk Management Office to be used for any subsequent workman's compensation claim.

3. Program Coordinators:

- a. Provide a copy of the exposure/accident report to the UMKC School of Medicine, GME Office to be placed in the resident's file and for monitoring safety compliance.
- b. Contact the Risk Management Office at 235-1623.

Definitions:

Blood means human blood, human blood components, and products made from human blood.

Bloodborne Pathogens means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

Contaminated means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

Contaminated Sharps means any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.

Decontamination means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.

Exposure Incident means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.

Occupational Exposure means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

Other Potentially Infectious Materials means (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids; (2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Parenteral means piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions.

Personal Protective Equipment is specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment.

Universal Precautions is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

Work Practice Controls means controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting recapping of needles by a two-handed technique).

References:

1. CDC (Centers for Disease Control and Prevention) [1998b]. Recommendations for prevention and control of hepatitis C virus (HCV) infection and HCV-related chronic disease. MMWR 47(RR19): 1—39.
2. NIOSH Alert: Preventing Needlestick Injuries in Health Care Settings; SHHS Pub # 2000-108, Nov. 1999.
3. OSHA Standard 1910.1030

Follow-up Responsibility: Director, Graduate Medical Education Operations.

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11/01/2006

Date

Approve/Disapprove



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